

**FEC  
FORM 3X****REPORT OF RECEIPTS  
AND DISBURSEMENTS**  
For Other Than An Authorized Committee

Office Use Only

1. NAME OF COMMITTEE (in full) TYPE OR PRINT ▼ Example: If typing, type over the lines.

12FE4M5

STOP THEM NOW PAC

ADDRESS (number and street)

PO BOX 6371

Check if different  
than previously  
reported. (ACC)

METAIRIE

LA

70009

2. FEC IDENTIFICATION NUMBER ▼

CITY ▲

STATE ▲

ZIP CODE ▲

C C00621862

3. IS THIS  
REPORTNEW  
(N)

OR

AMENDED  
(A)

## 4. TYPE OF REPORT

(Choose One)

(a) Quarterly Reports:

☐ April 15  
Quarterly Report (Q1)☐ July 15  
Quarterly Report (Q2)☒ October 15  
Quarterly Report (Q3)☐ January 31  
Year-End Report (YE)☐ July 31 Mid-Year  
Report (Non-election  
Year Only) (MY)☐ Termination Report  
(TER)(b) Monthly  
Report  
Due On:☐ Feb 20 (M2)☐ May 20 (M5)☐ Aug 20 (M8)☐ Nov 20 (M11)  
(Non-Election  
Year Only)☐ Mar 20 (M3)☐ Jun 20 (M6)☐ Sep 20 (M9)☐ Dec 20 (M12)  
(Non-Election  
Year Only)☐ Apr 20 (M4)☐ Jul 20 (M7)☐ Oct 20 (M10)☐ Jan 31 (YE)

(c) 12-Day

PRE-Election

Report for the:

☐ Primary (12P)☐ Convention (12C)☐ General (12G)☐ Special (12S)☐ Runoff (12R)

Election on

M M M / D D D / Y Y Y Y Y Y

in the  
State of

(d) 30-Day

POST-Election

Report for the:

☐ General (30G)☐ Runoff (30R)☐ Special (30S)

Election on

M M M / D D D / Y Y Y Y Y Y

in the  
State of

5. Covering Period

M M M / D D D / Y Y Y Y Y Y  
07 01 2016

through

M M M / D D D / Y Y Y Y Y Y  
09 30 2016

I certify that I have examined this Report and to the best of my knowledge and belief it is true, correct and complete.

Kamrass, Jared, , ,

Type or Print Name of Treasurer

Signature of Treasurer

Kamrass, Jared, , ,

[Electronically Filed]

Date

M M M / D D D / Y Y Y Y Y Y  
10 14 2016

NOTE: Submission of false, erroneous, or incomplete information may subject the person signing this Report to the penalties of 52 U.S.C. § 30109.

Office  
Use  
Only**FEC FORM 3X**  
Rev. 05/2016

# SUMMARY PAGE OF RECEIPTS AND DISBURSEMENTS

FEC Form 3X (Rev. 05/2016)

Page 2

Write or Type Committee Name

STOP THEM NOW PAC

Report Covering the Period:

From:

 M M / D D / Y Y Y Y Y  
 07 / 01 / 2016

To:

 M M / D D / Y Y Y Y Y  
 09 / 30 / 2016

|  | COLUMN A<br>This Period  | COLUMN B<br>Calendar Year-to-Date                                    |
|--|--|--|
| 6. (a) Cash on Hand<br>January 1, <span style="border: 1px solid black; padding: 2px;">Y Y Y Y Y<br/>2016</span> |  | <span style="border: 1px solid black; padding: 2px;">0.00</span>     |
| (b) Cash on Hand at<br>Beginning of Reporting Period.....  | <span style="border: 1px solid black; padding: 2px;">0.00</span>     |  |
| (c) Total Receipts (from Line 19) .....  | <span style="border: 1px solid black; padding: 2px;">34960.00</span> | <span style="border: 1px solid black; padding: 2px;">34960.00</span> |
| (d) Subtotal (add Lines 6(b) and<br>6(c) for Column A and Lines<br>6(a) and 6(c) for Column B).....              | <span style="border: 1px solid black; padding: 2px;">34960.00</span> | <span style="border: 1px solid black; padding: 2px;">34960.00</span> |
| 7. Total Disbursements (from Line 31).....   | <span style="border: 1px solid black; padding: 2px;">6001.75</span>  | <span style="border: 1px solid black; padding: 2px;">6001.75</span>  |
| 8. Cash on Hand at Close of<br>Reporting Period<br>(subtract Line 7 from Line 6(d)).....                         | <span style="border: 1px solid black; padding: 2px;">28958.25</span> | <span style="border: 1px solid black; padding: 2px;">28958.25</span> |
| 9. Debts and Obligations Owed <b>TO</b><br>the Committee (Itemize all on<br>Schedule C and/or Schedule D) .....  | <span style="border: 1px solid black; padding: 2px;">0.00</span>     |  |
| 10. Debts and Obligations Owed <b>BY</b><br>the Committee (Itemize all on<br>Schedule C and/or Schedule D) ..... | <span style="border: 1px solid black; padding: 2px;">0.00</span>     |  |



This committee has qualified as a multicandidate committee. (see FEC FORM 1M)

## For further information contact:

Federal Election Commission  
999 E Street, NW  
Washington, DC 20463

Toll Free 800-424-9530  
Local 202-694-1100

# **DETAILED SUMMARY PAGE** of Receipts

FEC Form 3X (Rev. 05/2016)

Page 3

Write or Type Committee Name

**STOP THEM NOW PAC**

Report Covering the Period:

From:

|     |   |     |   |             |
|-----|---|-----|---|-------------|
| M M | / | D D | / | Y Y Y Y Y Y |
| 07  | / | 01  | / | 2016        |

To:

|     |   |     |   |             |
|-----|---|-----|---|-------------|
| M M | / | D D | / | Y Y Y Y Y Y |
| 09  | / | 30  | / | 2016        |

**I. Receipts**
**COLUMN A**  
Total This Period

**COLUMN B**  
Calendar Year-to-Date

## 11. Contributions (other than loans) From:

## (a) Individuals/Persons Other

Than Political Committees

(i) Itemized (use Schedule A).....

34500.00

34500.00

(ii) Unitemized .....

460.00

460.00

(iii) TOTAL (add

Lines 11(a)(i) and (ii).....▶

34960.00

34960.00

(b) Political Party Committees .....

0.00

0.00

(c) Other Political Committees

(such as PACs).....

0.00

0.00

(d) Total Contributions (add Lines

11(a)(iii), (b), and (c)) (Carry

Totals to Line 33, page 5) .....

34960.00

34960.00

## 12. Transfers From Affiliated/Other

Party Committees.....

0.00

0.00

## 13. All Loans Received .....

0.00

0.00

## 14. Loan Repayments Received.....

0.00

0.00

## 15. Offsets To Operating Expenditures

(Refunds, Rebates, etc.)

(Carry Totals to Line 37, page 5).....

0.00

0.00

## 16. Refunds of Contributions Made

to Federal Candidates and Other

Political Committees.....

0.00

0.00

## 17. Other Federal Receipts

(Dividends, Interest, etc.).....

0.00

0.00

## 18. Transfers from Non-Federal and Levin Funds

(a) Non-Federal Account

(from Schedule H3) .....

0.00

0.00

(b) Levin Funds (from Schedule H5) .....

0.00

0.00

(c) Total Transfers (add 18(a) and 18(b))..

0.00

0.00

## 19. Total Receipts (add Lines 11(d),

12, 13, 14, 15, 16, 17, and 18(c)) .....

34960.00

34960.00

## 20. Total Federal Receipts

(subtract Line 18(c) from Line 19) .....

34960.00

34960.00

**DETAILED SUMMARY PAGE**

of Disbursements

FEC Form 3X (Rev. 05/2016)

Page 4

| II. Disbursements  | COLUMN A<br>Total This Period | COLUMN B<br>Calendar Year-to-Date |
|--|-------------------------------|-----------------------------------|
| 21. Operating Expenditures:  |                               |                                   |
| (a) Allocated Federal/Non-Federal Activity (from Schedule H4)                                  |                               |                                   |
| (i) Federal Share .....  | 0.00                          | 0.00                              |
| (ii) Non-Federal Share.....  | 0.00                          | 0.00                              |
| (b) Other Federal Operating Expenditures .....   | 6001.75                       | 6001.75                           |
| (c) Total Operating Expenditures (add 21(a)(i), (a)(ii), and (b)) .....                        | 6001.75                       | 6001.75                           |
| 22. Transfers to Affiliated/Other Party Committees.....  | 0.00                          | 0.00                              |
| 23. Contributions to Federal Candidates/Committees and Other Political Committees.....         | 0.00                          | 0.00                              |
| 24. Independent Expenditures (use Schedule E) .....  | 0.00                          | 0.00                              |
| 25. Coordinated Party Expenditures (52 U.S.C. § 30116(d)) (use Schedule F).....                | 0.00                          | 0.00                              |
| 26. Loan Repayments Made.....  | 0.00                          | 0.00                              |
| 27. Loans Made.....  | 0.00                          | 0.00                              |
| 28. Refunds of Contributions To:   |                               |                                   |
| (a) Individuals/Persons Other Than Political Committees .....                                  | 0.00                          | 0.00                              |
| (b) Political Party Committees .....   | 0.00                          | 0.00                              |
| (c) Other Political Committees (such as PACs).....   | 0.00                          | 0.00                              |
| (d) Total Contribution Refunds (add Lines 28(a), (b), and (c)).....                            | 0.00                          | 0.00                              |
| 29. Other Disbursements (Including Non-Federal Donations).....                                 | 0.00                          | 0.00                              |
| 30. Federal Election Activity (52 U.S.C. § 30101(20))  |                               |                                   |
| (a) Allocated Federal Election Activity (from Schedule H6)                                     |                               |                                   |
| (i) Federal Share .....  | 0.00                          | 0.00                              |
| (ii) "Levin" Share.....  | 0.00                          | 0.00                              |
| (b) Federal Election Activity Paid Entirely With Federal Funds .....                           | 0.00                          | 0.00                              |
| (c) Total Federal Election Activity (add Lines 30(a)(i), 30(a)(ii) and 30(b)) .....            | 0.00                          | 0.00                              |
| 31. Total Disbursements (add Lines 21(c), 22, 23, 24, 25, 26, 27, 28(d), 29 and 30(c)) ..      | 6001.75                       | 6001.75                           |
| 32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31)..... | 6001.75                       | 6001.75                           |

**DETAILED SUMMARY PAGE**  
of Disbursements

FEC Form 3X (Rev. 05/2016)

Page 5

| III. Net Contributions/<br>Operating Expenditures                                    | COLUMN A<br>Total This Period | COLUMN B<br>Calendar Year-to-Date |
|--|-------------------------------|-----------------------------------|
| 33. Total Contributions (other than loans)<br>(from Line 11(d), page 3) .....        | 34960.00                      | 34960.00                          |
| 34. Total Contribution Refunds<br>(from Line 28(d)) .....                            | 0.00                          | 0.00                              |
| 35. Net Contributions (other than loans)<br>(subtract Line 34 from Line 33) .....    | 34960.00                      | 34960.00                          |
| 36. Total Federal Operating Expenditures<br>(add Line 21(a)(i) and Line 21(b)) ..... | 6001.75                       | 6001.75                           |
| 37. Offsets to Operating Expenditures<br>(from Line 15, page 3).....                 | 0.00                          | 0.00                              |
| 38. Net Operating Expenditures<br>(subtract Line 37 from Line 36) .....              | 6001.75                       | 6001.75                           |

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 6 OF 19  
(check only one)  
☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)  
**STOP THEM NOW PAC**

|   |  |  |   |
|---|--|--|---|
| <b>A. Caller, Bret, , ,</b><br>Full Name of Individual (Last, First, Middle Initial) or Full Organization Name<br>Mailing Address 8125 Manor Hill Lane<br>City Cincinnati State OH Zip Code 45243<br>FEC ID number of contributing federal political committee. C<br>Name of Employer (for Individual) Viking Properties Occupation (for Individual) CEO<br>Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 3600.00    |  |  | Date of Receipt<br>M M / D D / Y Y Y Y Y Y<br>09 / 08 / 2016<br><b>Transaction ID : SA11AI.4120</b><br>Amount of Each Receipt this Period<br>3600.00<br><input type="checkbox"/> Memo Item Contribution |
| <b>B. Edelstein, Chaim, , ,</b><br>Full Name of Individual (Last, First, Middle Initial) or Full Organization Name<br>Mailing Address 1040 Park Avenue, 12E<br>City New York State NY Zip Code 10028<br>FEC ID number of contributing federal political committee. C<br>Name of Employer (for Individual) Unemployed Occupation (for Individual) N/A<br>Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 1000.00        |  |  | Date of Receipt<br>M M / D D / Y Y Y Y Y Y<br>09 / 08 / 2016<br><b>Transaction ID : SA11AI.4110</b><br>Amount of Each Receipt this Period<br>1000.00<br><input type="checkbox"/> Memo Item Contribution |
| <b>C. Eisenstadt, Samuel, , ,</b><br>Full Name of Individual (Last, First, Middle Initial) or Full Organization Name<br>Mailing Address 45 E 89th St Apt 24E<br>City New York State NY Zip Code 10128<br>FEC ID number of contributing federal political committee. C<br>Name of Employer (for Individual) Self-employed Occupation (for Individual) Lawyer<br>Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 5000.00 |  |  | Date of Receipt<br>M M / D D / Y Y Y Y Y Y<br>08 / 10 / 2016<br><b>Transaction ID : SA11AI.4100</b><br>Amount of Each Receipt this Period<br>5000.00<br><input type="checkbox"/> Memo Item Contribution |
| <b>SUBTOTAL</b> of Receipts This Page (optional)..... ▶   |  |  | 9600.00   |
| <b>TOTAL</b> This Period (last page this line number only)..... ▶   |  |  |   |

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 7 OF 19

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

**STOP THEM NOW PAC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. Friedman, Howard, , ,

Mailing Address 6201 Green Meadow Way

City  
Baltimore

State  
MD

Zip Code  
21209

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)

Self-employed

Occupation (for Individual)

Investor

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
09 / 14 / 2016

Transaction ID : SA11AI.4132

Amount of Each Receipt this Period

500.00

☐ Memo Item  
Contribution

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. Goldstein, Neil, , ,

Mailing Address 10 Brookside Ave

City  
Phelam

State  
NY

Zip Code  
10803

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)

Robinson Brog

Occupation (for Individual)

Attorney

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
09 / 08 / 2016

Transaction ID : SA11AI.4124

Amount of Each Receipt this Period

500.00

☐ Memo Item  
Contribution

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. Granoff, Michael, , ,

Mailing Address 700-76 Broadway, Suite 331

City  
Westwood

State  
NJ

Zip Code  
07675

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)

Maniv

Occupation (for Individual)

Executive

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

1000.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
09 / 14 / 2016

Transaction ID : SA11AI.4130

Amount of Each Receipt this Period

1000.00

☐ Memo Item  
Contribution

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

2000.00

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
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Detailed Summary Page

FOR LINE NUMBER: PAGE 8 OF 19

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

**STOP THEM NOW PAC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. Haspel, Ahron, , ,**

Mailing Address 14 Merrivale Road

City

Great Neck

State

NY

Zip Code

11021

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)

Self-employed

Occupation (for Individual)

Attorney

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
09 / 08 / 2016

Transaction ID : SA11AI.4126

Amount of Each Receipt this Period

500.00

☐ Memo Item  
Contribution

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. Ingber, Sidney, , ,**

Mailing Address 70 east 55 #8th floor

City

New York

State

NY

Zip Code

10022

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
Ingber and Klapper, LLC

Occupation (for Individual)

Lawyer

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1000.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
09 / 08 / 2016

Transaction ID : SA11AI.4114

Amount of Each Receipt this Period

1000.00

☐ Memo Item  
Contribution

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. Leighton, Mara, , ,**

Mailing Address 45 East 66th Street

City

New York

State

NY

Zip Code

10065

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)

Unemployed

Occupation (for Individual)

N/A

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

2500.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
09 / 27 / 2016

Transaction ID : SA11AI.4138

Amount of Each Receipt this Period

2500.00

☐ Memo Item  
Contribution

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

4000.00



# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
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Detailed Summary Page

FOR LINE NUMBER: PAGE 9 OF 19

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

**STOP THEM NOW PAC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. Leven, Michael, , ,**

Mailing Address 7295 Ballentrae Court

City

Boca Raton

State

FL

Zip Code

33496

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)

Georgia Aquarium

Occupation (for Individual)

CEO

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

10000.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
09 / 09 / 2016

Transaction ID : SA11AI.4116

Amount of Each Receipt this Period

10000.00

☐ Memo Item  
Contribution

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. Musher, David, , ,**

Mailing Address 1158 5th Ave

City

New York

State

NY

Zip Code

10029

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)

Unemployed

Occupation (for Individual)

N/A

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
08 / 26 / 2016

Transaction ID : SA11AI.4102

Amount of Each Receipt this Period

500.00

☐ Memo Item  
Contribution

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. Plaine, Leonard, , ,**

Mailing Address 993 Park Ave. 11 North

City

New York

State

NY

Zip Code

10028

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)

Self-employed

Occupation (for Individual)

Physician

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
09 / 08 / 2016

Transaction ID : SA11AI.4122

Amount of Each Receipt this Period

500.00

☐ Memo Item  
Contribution

**SUBTOTAL** of Receipts This Page (optional)..... ►

**TOTAL** This Period (last page this line number only)..... ►

11000.00

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
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Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 10 OF 19

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

**STOP THEM NOW PAC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. Rechtschaffen, Eric, , ,**

Mailing Address 415 E. 85th St.

City  
New York

State  
NY

Zip Code  
10028

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
OCH

Occupation (for Individual)  
Real Estate

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
09 / 07 / 2016

Transaction ID : SA11AI.4108

Amount of Each Receipt this Period

500.00

☐ Memo Item  
Contribution

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. Sable, David, , ,**

Mailing Address 201 West 70th St.

City  
New York

State  
NY

Zip Code  
10023

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
Young and Rubicam

Occupation (for Individual)  
Advertising

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
09 / 02 / 2016

Transaction ID : SA11AI.4106

Amount of Each Receipt this Period

500.00

☐ Memo Item  
Contribution

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. Satin, Maury, , ,**

Mailing Address 170 E 77th St. Apt 4D

City  
New York

State  
NY

Zip Code  
10021

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
Vistage

Occupation (for Individual)  
Regional President

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
09 / 08 / 2016

Transaction ID : SA11AI.4118

Amount of Each Receipt this Period

500.00

☐ Memo Item  
Contribution

**SUBTOTAL** of Receipts This Page (optional)..... ►

**TOTAL** This Period (last page this line number only)..... ►

1500.00

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 11 OF 19

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

**STOP THEM NOW PAC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. Schmerler, Charles, , ,**

Mailing Address 666 5th Ave.

City  
New York

State  
NY

Zip Code  
10103

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)

Norton, Rose & Fulbright

Occupation (for Individual)

Attorney

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
09 / 08 / 2016

**Transaction ID : SA11AI.4128**

Amount of Each Receipt this Period

500.00

☐ Memo Item  
Contribution

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. Stone, Richard, , ,**

Mailing Address 104 West 70th St., Apt 9E

City  
New York

State  
NY

Zip Code  
10023

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
Columbia Law School

Occupation (for Individual)  
Professor

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
09 / 19 / 2016

**Transaction ID : SA11AI.4134**

Amount of Each Receipt this Period

500.00

☐ Memo Item  
Contribution

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. Swartz, Jeffrey, , ,**

Mailing Address 29 Merrill Rd

City  
Newton

State  
MA

Zip Code  
02459

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
Unemployed

Occupation (for Individual)  
N/A

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

5000.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
08 / 28 / 2016

**Transaction ID : SA11AI.4104**

Amount of Each Receipt this Period

5000.00

☐ Memo Item  
Contribution

**SUBTOTAL** of Receipts This Page (optional)..... ►

**TOTAL** This Period (last page this line number only)..... ►

6000.00

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 12 OF 19  
 (check only one)  
☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)  
**STOP THEM NOW PAC**

|   |             |                   |   |  |  |
|---|-------------|-------------------|---|--|--|
| Full Name of Individual (Last, First, Middle Initial) or Full Organization Name<br><b>A. Zapata, Michael, , ,</b>   |             |                   | Date of Receipt<br><div style="border: 1px solid black; padding: 2px; display: flex; justify-content: space-around;"> <span>M M / D D / Y Y Y Y Y Y</span> </div> <div style="border: 1px solid black; padding: 2px; display: flex; justify-content: space-around;"> <span>09 / 08 / 2016</span> </div> <b>Transaction ID : SA11AI.4112</b> |  |  |
| Mailing Address 102 W. 87th St  |             |                   | Amount of Each Receipt this Period<br><div style="border: 1px solid black; padding: 2px; display: flex; justify-content: space-between;"> <span></span> <span>400.00</span> </div>  |  |  |
| City<br>New York  | State<br>NY | Zip Code<br>10024 | <input type="checkbox"/> Memo Item Contribution   |  |  |
| FEC ID number of contributing federal political committee.<br><div style="border: 1px solid black; padding: 2px; display: flex; justify-content: space-between;"> <span>C</span> <span></span> </div> |             |                   | Aggregate Year-to-Date ▼<br><div style="border: 1px solid black; padding: 2px; display: flex; justify-content: space-between;"> <span></span> <span>400.00</span> </div>  |  |  |
| Name of Employer (for Individual)<br>Sentientia Capital   |             |                   | Occupation (for Individual)<br>Investor   |  |  |
| Receipt For:<br><input type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼   |             |                   | Aggregate Year-to-Date ▼<br><div style="border: 1px solid black; padding: 2px; display: flex; justify-content: space-between;"> <span></span> <span></span> </div>  |  |  |

  

|   |       |          |  |  |  |
|---|-------|----------|--|--|--|
| Full Name of Individual (Last, First, Middle Initial) or Full Organization Name<br><b>B.</b>  |       |          | Date of Receipt<br><div style="border: 1px solid black; padding: 2px; display: flex; justify-content: space-around;"> <span>M M / D D / Y Y Y Y Y Y</span> </div>            |  |  |
| Mailing Address   |       |          | Amount of Each Receipt this Period<br><div style="border: 1px solid black; padding: 2px; display: flex; justify-content: space-between;"> <span></span> <span></span> </div> |  |  |
| City  | State | Zip Code | <input type="checkbox"/> Memo Item   |  |  |
| FEC ID number of contributing federal political committee.<br><div style="border: 1px solid black; padding: 2px; display: flex; justify-content: space-between;"> <span>C</span> <span></span> </div> |       |          | Aggregate Year-to-Date ▼<br><div style="border: 1px solid black; padding: 2px; display: flex; justify-content: space-between;"> <span></span> <span></span> </div>           |  |  |
| Name of Employer (for Individual)   |       |          | Occupation (for Individual)  |  |  |
| Receipt For:<br><input type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼   |       |          | Aggregate Year-to-Date ▼<br><div style="border: 1px solid black; padding: 2px; display: flex; justify-content: space-between;"> <span></span> <span></span> </div>           |  |  |

  

|   |       |          |  |  |  |
|---|-------|----------|--|--|--|
| Full Name of Individual (Last, First, Middle Initial) or Full Organization Name<br><b>C.</b>  |       |          | Date of Receipt<br><div style="border: 1px solid black; padding: 2px; display: flex; justify-content: space-around;"> <span>M M / D D / Y Y Y Y Y Y</span> </div>            |  |  |
| Mailing Address   |       |          | Amount of Each Receipt this Period<br><div style="border: 1px solid black; padding: 2px; display: flex; justify-content: space-between;"> <span></span> <span></span> </div> |  |  |
| City  | State | Zip Code | <input type="checkbox"/> Memo Item   |  |  |
| FEC ID number of contributing federal political committee.<br><div style="border: 1px solid black; padding: 2px; display: flex; justify-content: space-between;"> <span>C</span> <span></span> </div> |       |          | Aggregate Year-to-Date ▼<br><div style="border: 1px solid black; padding: 2px; display: flex; justify-content: space-between;"> <span></span> <span></span> </div>           |  |  |
| Name of Employer (for Individual)   |       |          | Occupation (for Individual)  |  |  |
| Receipt For:<br><input type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify)   |       |          | Aggregate Year-to-Date ▼<br><div style="border: 1px solid black; padding: 2px; display: flex; justify-content: space-between;"> <span></span> <span></span> </div>           |  |  |

  

|   |  |
|---|--|
| <b>SUBTOTAL</b> of Receipts This Page (optional).....           | <div style="border: 1px solid black; padding: 2px; display: flex; justify-content: space-between;"> <span></span> <span>400.00</span> </div>   |
| <b>TOTAL</b> This Period (last page this line number only)..... | <div style="border: 1px solid black; padding: 2px; display: flex; justify-content: space-between;"> <span></span> <span>34500.00</span> </div> |

**SCHEDULE B (FEC Form 3X)**  
**ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 13 OF 19

|   |                              |                              |                             |                              |
|---|------------------------------|------------------------------|-----------------------------|------------------------------|
| <input checked="" type="checkbox"/> 21b | <input type="checkbox"/> 22  | <input type="checkbox"/> 23  | <input type="checkbox"/> 26 | <input type="checkbox"/> 27  |
| <input type="checkbox"/> 28a            | <input type="checkbox"/> 28b | <input type="checkbox"/> 28c | <input type="checkbox"/> 29 | <input type="checkbox"/> 30b |

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NAME OF COMMITTEE (In Full)

**STOP THEM NOW PAC**

Full Name (Last, First, Middle Initial)

**A. 202 Strategies**

Mailing Address 3717 Edenborn Ave.

City  
MetairieState  
LAZip Code  
70002Purpose of Disbursement  
Production costs

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ PresidentDisbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

|       |   |       |   |             |
|-------|---|-------|---|-------------|
| M M M | / | D D D | / | Y Y Y Y Y Y |
| 09    |   | 16    |   | 2016        |

FEC Identification Number

**C****Transaction ID : SB21B.4165**

Amount of Each Disbursement this Period

1140.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

**B. ActBlue Technical Services**

Mailing Address POB 382110

City  
CambridgeState  
MAZip Code  
02238Purpose of Disbursement  
Online Fee

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ PresidentDisbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

|       |   |       |   |             |
|-------|---|-------|---|-------------|
| M M M | / | D D D | / | Y Y Y Y Y Y |
| 08    |   | 26    |   | 2016        |

FEC Identification Number

**C****Transaction ID : SB21B.4142**

Amount of Each Disbursement this Period

19.75

☐ Memo Item

Full Name (Last, First, Middle Initial)

**C. ActBlue Technical Services**

Mailing Address POB 382110

City  
CambridgeState  
MAZip Code  
02238Purpose of Disbursement  
Online fee

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ PresidentDisbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

|       |   |       |   |             |
|-------|---|-------|---|-------------|
| M M M | / | D D D | / | Y Y Y Y Y Y |
| 08    |   | 26    |   | 2016        |

FEC Identification Number

**C****Transaction ID : SB21B.4144**

Amount of Each Disbursement this Period

197.50

☐ Memo Item**SUBTOTAL** of Disbursements This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

1357.25

**SCHEDULE B (FEC Form 3X)**  
**ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 14 OF 19

|   |                              |                              |                             |                              |
|---|------------------------------|------------------------------|-----------------------------|------------------------------|
| <input checked="" type="checkbox"/> 21b | <input type="checkbox"/> 22  | <input type="checkbox"/> 23  | <input type="checkbox"/> 26 | <input type="checkbox"/> 27  |
| <input type="checkbox"/> 28a            | <input type="checkbox"/> 28b | <input type="checkbox"/> 28c | <input type="checkbox"/> 29 | <input type="checkbox"/> 30b |

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NAME OF COMMITTEE (In Full)

**STOP THEM NOW PAC**

Full Name (Last, First, Middle Initial)

**A. ActBlue Technical Services**

Mailing Address POB 382110

City  
CambridgeState  
MAZip Code  
02238Purpose of Disbursement  
Online fee

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ PresidentDisbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

|       |   |       |   |             |
|-------|---|-------|---|-------------|
| M M M | / | D D D | / | Y Y Y Y Y Y |
| 08    |   | 28    |   | 2016        |

FEC Identification Number

**C****Transaction ID : SB21B.4145**

Amount of Each Disbursement this Period

19.75

☐ Memo Item

Full Name (Last, First, Middle Initial)

**B. ActBlue Technical Services**

Mailing Address POB 382110

City  
CambridgeState  
MAZip Code  
02238Purpose of Disbursement  
Online fee

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ PresidentDisbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

|       |   |       |   |             |
|-------|---|-------|---|-------------|
| M M M | / | D D D | / | Y Y Y Y Y Y |
| 09    |   | 20    |   | 2016        |

FEC Identification Number

**C****Transaction ID : SB21B.4152**

Amount of Each Disbursement this Period

39.50

☐ Memo Item

Full Name (Last, First, Middle Initial)

**C. ActBlue Technical Services**

Mailing Address POB 382110

City  
CambridgeState  
MAZip Code  
02238Purpose of Disbursement  
Online fee

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ PresidentDisbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

|       |   |       |   |             |
|-------|---|-------|---|-------------|
| M M M | / | D D D | / | Y Y Y Y Y Y |
| 09    |   | 20    |   | 2016        |

FEC Identification Number

**C****Transaction ID : SB21B.4153**

Amount of Each Disbursement this Period

19.75

☐ Memo Item**SUBTOTAL** of Disbursements This Page (optional).....▶**TOTAL** This Period (last page this line number only).....▶

79.00

**SCHEDULE B (FEC Form 3X)**  
**ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 15 OF 19

|   |                              |                              |                             |                              |
|---|------------------------------|------------------------------|-----------------------------|------------------------------|
| <input checked="" type="checkbox"/> 21b | <input type="checkbox"/> 22  | <input type="checkbox"/> 23  | <input type="checkbox"/> 26 | <input type="checkbox"/> 27  |
| <input type="checkbox"/> 28a            | <input type="checkbox"/> 28b | <input type="checkbox"/> 28c | <input type="checkbox"/> 29 | <input type="checkbox"/> 30b |

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NAME OF COMMITTEE (In Full)

**STOP THEM NOW PAC**

Full Name (Last, First, Middle Initial)

**A. ActBlue Technical Services**

Mailing Address POB 382110

City  
CambridgeState  
MAZip Code  
02238Purpose of Disbursement  
Online fee

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ PresidentDisbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

|       |   |       |   |             |
|-------|---|-------|---|-------------|
| M M M | / | D D D | / | Y Y Y Y Y Y |
| 09    |   | 20    |   | 2016        |

FEC Identification Number

**C****Transaction ID : SB21B.4154**

Amount of Each Disbursement this Period

19.75

☐ Memo Item

Full Name (Last, First, Middle Initial)

**B. ActBlue Technical Services**

Mailing Address POB 382110

City  
CambridgeState  
MAZip Code  
02238Purpose of Disbursement  
Online fee

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ PresidentDisbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

|       |   |       |   |             |
|-------|---|-------|---|-------------|
| M M M | / | D D D | / | Y Y Y Y Y Y |
| 09    |   | 20    |   | 2016        |

FEC Identification Number

**C****Transaction ID : SB21B.4155**

Amount of Each Disbursement this Period

19.75

☐ Memo Item

Full Name (Last, First, Middle Initial)

**C. ActBlue Technical Services**

Mailing Address POB 382110

City  
CambridgeState  
MAZip Code  
02238Purpose of Disbursement  
Online fee

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ PresidentDisbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

|       |   |       |   |             |
|-------|---|-------|---|-------------|
| M M M | / | D D D | / | Y Y Y Y Y Y |
| 09    |   | 20    |   | 2016        |

FEC Identification Number

**C****Transaction ID : SB21B.4156**

Amount of Each Disbursement this Period

19.75

☐ Memo Item**SUBTOTAL** of Disbursements This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

59.25

**SCHEDULE B (FEC Form 3X)**  
**ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 16 OF 19

|   |                              |                              |                             |                              |
|---|------------------------------|------------------------------|-----------------------------|------------------------------|
| <input checked="" type="checkbox"/> 21b | <input type="checkbox"/> 22  | <input type="checkbox"/> 23  | <input type="checkbox"/> 26 | <input type="checkbox"/> 27  |
| <input type="checkbox"/> 28a            | <input type="checkbox"/> 28b | <input type="checkbox"/> 28c | <input type="checkbox"/> 29 | <input type="checkbox"/> 30b |

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NAME OF COMMITTEE (In Full)

**STOP THEM NOW PAC**

Full Name (Last, First, Middle Initial)

**A. ActBlue Technical Services**

Mailing Address POB 382110

City  
CambridgeState  
MAZip Code  
02238Purpose of Disbursement  
Online fee

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ PresidentDisbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

|       |   |       |   |             |
|-------|---|-------|---|-------------|
| M M M | / | D D D | / | Y Y Y Y Y Y |
| 09    |   | 20    |   | 2016        |

FEC Identification Number

**C****Transaction ID : SB21B.4157**

Amount of Each Disbursement this Period

15.80

☐ Memo Item

Full Name (Last, First, Middle Initial)

**B. ActBlue Technical Services**

Mailing Address POB 382110

City  
CambridgeState  
MAZip Code  
02238Purpose of Disbursement  
Online fee

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ PresidentDisbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

|       |   |       |   |             |
|-------|---|-------|---|-------------|
| M M M | / | D D D | / | Y Y Y Y Y Y |
| 09    |   | 20    |   | 2016        |

FEC Identification Number

**C****Transaction ID : SB21B.4158**

Amount of Each Disbursement this Period

39.50

☐ Memo Item

Full Name (Last, First, Middle Initial)

**C. ActBlue Technical Services**

Mailing Address POB 382110

City  
CambridgeState  
MAZip Code  
02238Purpose of Disbursement  
Online fee

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ PresidentDisbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

|       |   |       |   |             |
|-------|---|-------|---|-------------|
| M M M | / | D D D | / | Y Y Y Y Y Y |
| 09    |   | 20    |   | 2016        |

FEC Identification Number

**C****Transaction ID : SB21B.4159**

Amount of Each Disbursement this Period

395.00

☐ Memo Item**SUBTOTAL** of Disbursements This Page (optional).....▶**TOTAL** This Period (last page this line number only).....▶

450.30



**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 17 OF 19

|   |                              |                              |                             |                              |
|---|------------------------------|------------------------------|-----------------------------|------------------------------|
| <input checked="" type="checkbox"/> 21b | <input type="checkbox"/> 22  | <input type="checkbox"/> 23  | <input type="checkbox"/> 26 | <input type="checkbox"/> 27  |
| <input type="checkbox"/> 28a            | <input type="checkbox"/> 28b | <input type="checkbox"/> 28c | <input type="checkbox"/> 29 | <input type="checkbox"/> 30b |

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NAME OF COMMITTEE (In Full)

**STOP THEM NOW PAC**

Full Name (Last, First, Middle Initial)

**A. ActBlue Technical Services**

Mailing Address POB 382110

City  
CambridgeState  
MAZip Code  
02238Purpose of Disbursement  
Online fee

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ PresidentDisbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

|       |   |       |   |             |
|-------|---|-------|---|-------------|
| M M M | / | D D D | / | Y Y Y Y Y Y |
| 09    |   | 20    |   | 2016        |

FEC Identification Number

**C****Transaction ID : SB21B.4161**

Amount of Each Disbursement this Period

19.75

☐ Memo Item

Full Name (Last, First, Middle Initial)

**B. ActBlue Technical Services**

Mailing Address POB 382110

City  
CambridgeState  
MAZip Code  
02238Purpose of Disbursement  
Online fee

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ PresidentDisbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

|       |   |       |   |             |
|-------|---|-------|---|-------------|
| M M M | / | D D D | / | Y Y Y Y Y Y |
| 09    |   | 20    |   | 2016        |

FEC Identification Number

**C****Transaction ID : SB21B.4162**

Amount of Each Disbursement this Period

7.11

☐ Memo Item

Full Name (Last, First, Middle Initial)

**C. ActBlue Technical Services**

Mailing Address POB 382110

City  
CambridgeState  
MAZip Code  
02238Purpose of Disbursement  
Online fee

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ PresidentDisbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

|       |   |       |   |             |
|-------|---|-------|---|-------------|
| M M M | / | D D D | / | Y Y Y Y Y Y |
| 09    |   | 20    |   | 2016        |

FEC Identification Number

**C****Transaction ID : SB21B.4163**

Amount of Each Disbursement this Period

98.75

☐ Memo Item**SUBTOTAL** of Disbursements This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

125.61

**SCHEDULE B (FEC Form 3X)**  
**ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 18 OF 19

|   |                              |                              |                             |                              |
|---|------------------------------|------------------------------|-----------------------------|------------------------------|
| <input checked="" type="checkbox"/> 21b | <input type="checkbox"/> 22  | <input type="checkbox"/> 23  | <input type="checkbox"/> 26 | <input type="checkbox"/> 27  |
| <input type="checkbox"/> 28a            | <input type="checkbox"/> 28b | <input type="checkbox"/> 28c | <input type="checkbox"/> 29 | <input type="checkbox"/> 30b |

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NAME OF COMMITTEE (In Full)

**STOP THEM NOW PAC**

Full Name (Last, First, Middle Initial)

**A. Kamrass, Jared, , ,**

Mailing Address 224 E 8th St

City  
CincinnatiState  
OHZip Code  
45202Purpose of Disbursement  
Travel costs

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ PresidentDisbursement For:  
☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

|       |   |       |   |           |
|-------|---|-------|---|-----------|
| M M M | / | D D D | / | Y Y Y Y Y |
| 09    |   | 09    |   | 2016      |

FEC Identification Number

**C****Transaction ID : SB21B.4151**

Amount of Each Disbursement this Period

796.20

☐ Memo Item

Full Name (Last, First, Middle Initial)

**B. Miller, Stephan, , ,**

Mailing Address 3717 Edenborn Ave.

City  
MetairieState  
LAZip Code  
70002Purpose of Disbursement  
Meeting Costs

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ PresidentDisbursement For:  
☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

|       |   |       |   |           |
|-------|---|-------|---|-----------|
| M M M | / | D D D | / | Y Y Y Y Y |
| 09    |   | 09    |   | 2016      |

FEC Identification Number

**C****Transaction ID : SB21B.4148**

Amount of Each Disbursement this Period

2208.48

☐ Memo Item

Full Name (Last, First, Middle Initial)

**C. Miller, Stephan, , ,**

Mailing Address 3717 Edenborn Ave.

City  
MetairieState  
LAZip Code  
70002Purpose of Disbursement  
Travel costs

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ PresidentDisbursement For:  
☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

|       |   |       |   |           |
|-------|---|-------|---|-----------|
| M M M | / | D D D | / | Y Y Y Y Y |
| 09    |   | 09    |   | 2016      |

FEC Identification Number

**C****Transaction ID : SB21B.4150**

Amount of Each Disbursement this Period

794.20

☐ Memo Item**SUBTOTAL** of Disbursements This Page (optional).....▶**TOTAL** This Period (last page this line number only).....▶

3798.88

**SCHEDULE B (FEC Form 3X)**  
**ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 19 OF 19

|   |                              |                              |                             |                              |
|---|------------------------------|------------------------------|-----------------------------|------------------------------|
| <input checked="" type="checkbox"/> 21b | <input type="checkbox"/> 22  | <input type="checkbox"/> 23  | <input type="checkbox"/> 26 | <input type="checkbox"/> 27  |
| <input type="checkbox"/> 28a            | <input type="checkbox"/> 28b | <input type="checkbox"/> 28c | <input type="checkbox"/> 29 | <input type="checkbox"/> 30b |

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NAME OF COMMITTEE (In Full)

**STOP THEM NOW PAC**

Full Name (Last, First, Middle Initial)

**A. Miller, Stephan, , ,**

Mailing Address 3717 Edenborn Ave.

City  
MetairieState  
LAZip Code  
70002Purpose of Disbursement  
Travel costs

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President

State: District:

Disbursement For:  
☐ Primary ☐ General  
☐ Other (specify) ▼Category/  
Type

Date of Disbursement

|       |   |       |   |             |
|-------|---|-------|---|-------------|
| M M M | / | D D D | / | Y Y Y Y Y Y |
| 09    |   | 16    |   | 2016        |

FEC Identification Number

**C****Transaction ID : SB21B.4164**

Amount of Each Disbursement this Period

102.47

☐ Memo Item

Full Name (Last, First, Middle Initial)

**B.**

Mailing Address

City

State

Zip Code

Purpose of Disbursement

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President

State: District:

Disbursement For:  
☐ Primary ☐ General  
☐ Other (specify)Category/  
Type

Date of Disbursement

|       |   |       |   |             |
|-------|---|-------|---|-------------|
| M M M | / | D D D | / | Y Y Y Y Y Y |
|       |   |       |   |             |

FEC Identification Number

**C**

Amount of Each Disbursement this Period

☐ Memo Item

Full Name (Last, First, Middle Initial)

**C.**

Mailing Address

City

State

Zip Code

Purpose of Disbursement

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President

State: District:

Disbursement For:  
☐ Primary ☐ General  
☐ Other (specify) ▼Category/  
Type

Date of Disbursement

|       |   |       |   |             |
|-------|---|-------|---|-------------|
| M M M | / | D D D | / | Y Y Y Y Y Y |
|       |   |       |   |             |

FEC Identification Number

**C**

Amount of Each Disbursement this Period

☐ Memo Item**SUBTOTAL** of Disbursements This Page (optional).....▶**TOTAL** This Period (last page this line number only).....▶

102.47

5972.76